Certificate of Transmission under 37 CFR 1.8

RE: Application No. 10/810,526 Filing Date: 03/27/2004 Atty. Docket No.: 403104-A-01-US (Orbach)

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office FAX No. 571-273-8300

John C. Moran

Typed or printed name of person signing Certificate

FAX No.: 303-920-9113

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

FOLLOWING PAPERS ARE INCLUDED IN THIS TRANSMISSION

- 1. RCE (PTO/SB/30) 1 page (duplicate)
- 2. Credit Card Payment (PTO 2038) 1 page (duplicate)
- 3. Transmittal form PTO/SB/21 1 page
- 4. Response/Amendment 15 pages

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sont to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED 3039209113 CENTRAL FAX CENTER

APR 1 8 2008

AI IV 1 0 2000

PTO/SB/21 (02-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/810.528 TRANSMITTAL Filing Date 03/27/2004 **FORM** First Named Inventor Julian James Orbach Art Unit 2617 (to be used for all correspondence after initial filing) **Examiner Name** Doan, Kiet M. Attorney Docket Number 18 403104-A-01-US (Orbach) Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication Fee Transmittel Form Drawing(s) to Technology Center (TC) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Request for Continuing Examination under Request for Refund Express Abandonment Request 37 CFR 1.114 Credit Card Payment Form (duplicate) CD, Number of CD(s) Information Disclosure Statement Remarks Certifled Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm John C. Moran Individual name Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facetmile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name John C. Moran Signature

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.